Application or Docket Number

## PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2001

CLAIMS AS FILED - PART I (Column 1) (Column 2)							_	SMALL ENTITY TYPE			OTHER THAN OR SMALL ENTITY			
TOTAL CLAIMS					1			RATE	FEE	] [	RATE	FEE		
FOR			NUMBER FILED		NUMBER EXTRA			BASIC FEE	370.00	OR	BASIC FEE	740.00		
TOTAL CHARGEABLE CLAIMS			minus 20=		*			X\$ 9=		OR	X\$18=			
INDEPENDENT CLAIMS			mir	nus 3 =	*			X42=		OR	X84=			
MU	LTIPLE DEPEN	DENT CLAIM PI	RESENT					+140=		OR	+280=			
* If	the difference	in column 1 is	less than zero, enter "0" in column 2			olumn 2	ı	TOTAL		OR	TOTAL			
CLAIMS AS AMENDED - PART II (Column 1) (Column 2)						(Column 3)	_	SMALL	ENTITY	OR	OTHER SMALL			
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVI	HEST	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE		
NDW	Total	* 16	Minus	** (	20	=		X\$ 9=		OR	X\$18=			
AME	Independent	* 2	Minus	***	3 TCLAIM	= /		X42=		OR	X84=			
Ļ	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM  BEST AVAILABLE COPY						,	+140=		OR	+280=			
<del></del>							ı	TOTAL ADDIT. FEE		OR	TOTAL ADDIT. FEE			
		(Column 1)		(Colu	ımn 2)	(Column 3)		יייייייייייייייייייייייייייייייייייייי		•				
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT	- N	HIGH NUM PREVI	HEST MBER IOUSLY D FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE		
	Total	*	Minus	**		=	11	X\$ 9=		OR	X\$18=			
	Independent	*	Minus	***	T CL AIRA	]=	┨╏	X42=		OR	X84=			
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							┙╽	+140=		OR	+280=			
							l.	TOTAL ADDIT. FEE		OR	TOTAL ADDIT. FEE			
		_												
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		NUN PREV	HEST MBER HOUSLY D FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE		
	Total	*	Minus	**		=	]	X\$ 9=		OR	X\$18=			
	Independent	*	Minus	***		=	╽	X42=		OR	X84=			
	FIRST PRESE	NTATION OF M	IULTIPLE DE	PENDEN	IT CLAIN		L		<u> </u>	1		1		
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.								+140=		OR	+280=	<u> </u>		
**	If the "Highest Nu	ımber Previously F	Paid For" IN TH	IS SPACE	E is less tha	an 20, enter "20	O." .	TOTAL ADDIT. FEE		OR	TOTAL ADDIT. FEE			
<b>l</b> "	The Highest Nur	mber Previously P	aid For" (Total o	***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."  The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.										